

Robert E. Bush, Medal of Honor recipient and namesake of Naval Hospital Twentynine Palms, speaks at the recent barracks dedication ceremony.

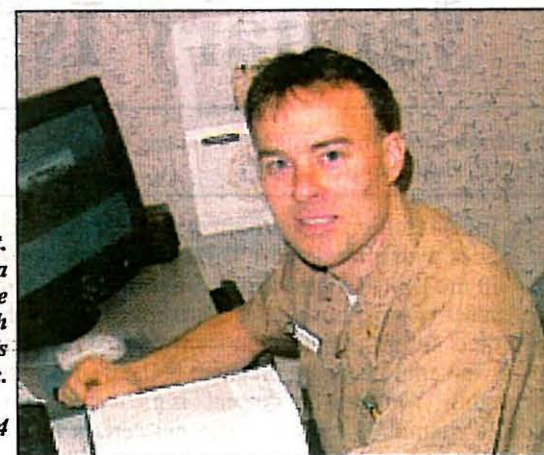
See Below



Robert E. Bush
Naval Hospital

Introducing Lt. Mark R. Danforth, a physician in the Robert E. Bush Naval Hospital's Primary Care Clinic.

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Hospital Barracks Dedicated to Former Command Master Chief

By Dan Barber, Public Affairs Officer
Robert E. Bush Naval Hospital

In a recent ceremony the hospital barracks located at the Marine Air Ground Task Force Training Command was renamed and dedicated to the memory of the hospital's former Command Master Chief, HMCM (SS) Craig Carson.

Present for the ceremony were members of Carson's family including his wife, Chris, brother Mark and his wife Lisa, sister Penny and his cousin retired Navy Captain Jim Carson and his wife Jennie. Also, in attendance was Robert E. Bush, (the namesake of the command), hospital staff, barracks residents, and several members of the local Shriners.

In her comment's, Captain Lynda A. Salmond, the previous Commanding Officer, Robert E. Bush Naval Hospital, said, "Master Chief (Carson) was the chief consultant and the coordinator for this barracks. He's the one who made sure it got furnished, when at the last minute they said there was no money for furniture. He made sure it had a computer room and everything else his Sailors would need to have a good quality of life." The Captain went on to add, "I know Craig's up there, watching us today... fussing about all the attention he's getting. But the attention is



Christine Carson, the wife of HMCM Craig Carson, unveils the new name of the hospital barracks at a special ceremony.

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Inside...

Of the 4 million babies born every year in the United States, about 3 to 5 percent are born with birth defects. Birth defects are one of the leading causes of infant deaths in the United States and account for 20 percent of all infant deaths. *page 2*

As of December 28, patients of the Robert E. Bush Naval Hospital, as well as any military health care beneficiary, whose first prenatal visit occurs on this date or after, have more choices for their prenatal care, labor and delivery, and post-natal care under new TRICARE rules. *page 3*

According to Cmdr. John Rothacker, Director of Military Medicine, the Robert E. Bush Naval Hospital has provided more than 15,000 doses of the flu vaccine to its eligible beneficiaries. *page 6*

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Here's to your health...

January Is Birth Defect Prevention Month

By Martha Hunt, M.A. Health Promotions Coordinator
Robert E. Bush Naval Hospital

Of the 4 million babies born every year in the United States, about 3 to 5 percent are born with birth defects. Birth defects are one of the leading causes of infant deaths in the United States and account for 20 percent of all infant deaths.

The causes of most birth defects are unknown but there are some ways that a woman can help protect future pregnancies from the risk of birth defects. A healthy lifestyle for all women who could become pregnant is the best way to minimize the risk of birth defects.

The saying "You are what you eat" is great advice both before and during pregnancy. Folic acid, a B vitamin, is known to prevent certain birth defects. Folic acid is found in green leafy vegetables, citrus fruits, and legumes. Taking extra folic acid reduces a woman's chance of having a child with spina bifida and other abnormalities of the spine and brain. Tobacco use also robs a woman of folic acid and increases her risk of birth defects.

Too much Vitamin A or D can be toxic at levels higher than the recommended daily allowance. Women taking dietary supplements need to be aware of this risk and the amount of these vitamins they are taking.

Never eat raw or undercooked meat and seafood if pregnant. Bacteria from these can cause severe food poisoning, which is dangerous to a fetus. Soft drinks, coffee, tea, and other caffeinated drinks can be used in moderation.

Alcohol is the most common known cause of birth defects in the US and the leading cause of preventable mental retardation. Pregnant women who drink alcohol, especially in large amounts, put their babies at risk for fetal alcohol syndrome (FAS).

A pregnant woman who has a serious health problem may have a greater than normal risk that her child will have a birth defect. For example, Diabetes can complicate a pregnancy in many ways. Birth defects among diabetics can be greatly reduced if women get their blood sugar levels under control before becoming pregnant and strictly manage their diets throughout pregnancy. Gestational diabetes, which develops during pregnancy, can also be harmful to mother and child, but it can be controlled through diet or medication.

Epilepsy increases a woman's chance of having a baby with a birth defect. It's not clear whether the disease itself or the drugs used to control it cause birth defects, but when a woman follows her provider's guidance, the risks can be reduced.

Rubella, toxoplasmosis, cytomegalovirus, and syphilis can cause birth defects in the infants of women who have these infectious diseases. Any woman planning a pregnancy should be tested for rubella immunity and vaccinated if necessary.

Toxoplasmosis is transmitted only through raw meat and cat feces, both of which pregnant women should avoid. If a woman has syphilis, she should be treated with antibiotics before pregnancy. Cytomegalovirus (CMV) is a herpes virus that causes no real problem for adults and children. In pregnancy, however, it can cause birth defects.

A pregnant woman shouldn't take any drug unless it is absolutely necessary and not until she's checked with her health-care provider. Accutane should never be used in pregnancy as it causes serious birth defects.

Most of the chemicals a pregnant woman encounters are little threat compared with the harm in smoking, drinking alcohol, or eating a poor diet. However, daily, heavy exposure to some chemicals may be dangerous. If a pregnant woman must work around heavy fumes or chemicals she should use gloves, masks and have proper ventilation.

Some metals such should be avoided at all times, but especially during pregnancy. Removing old leaded paint, drinking water from a pipe soldered with lead, or drinking out of decorative pottery containing lead can cause lead poisoning and mental retardation in a fetus.

X-rays are also dangerous to developing babies. All women who could be pregnant and need an x-ray should have her tummy shielded with a lead apron.

Taking hot baths, using saunas, or exercising in hot weather can raise a woman's inner body temperature and have the potential to cause birth defects. Lukewarm baths and moderate exercise are fine, however.

Recent studies have not found any relationship between computer terminals and miscarriages. Of all the environmental harms, undoubtedly the most harmful is smoking. Tobacco use has been linked to cleft lip and palate, ADHD, developmental delay, clubfoot and numerous other birth defects. It is also a leading cause of stillbirth and miscarriage.

Finally, a number of birth defects are inherited. They usually occur when the baby inherits a matching pair of disease-causing genes, one from each parent. This is most often an issue for couples of similar ethnic or geographic origins or couples that are closely related, such as first cousins.

For example, African-American couples are most at risk for having a child with sickle cell anemia. While people who are of Ashkenazi Jewish or French Canadian descent may be carriers of Tay-Sachs disease, Canavan, Cystic Fibrosis, Gaucher, Niemann Pick, Familial dysautonomia, Bloom, and Fanconi. People who know of genetic disorders in their families, or those who have already had one child with a disorder, are also at a greater risk.

Some genetic abnormalities, such as Down syndrome increase with the parents' ages. Parents over 35 are at higher risk of having a child with a genetic abnormality.

For the most part, a woman can do a lot to ensure the health of her child by maintaining a healthy lifestyle herself. Don't drink alcohol or smoke and eat a balanced diet rich in vitamins and both you and your baby will be much healthier for it.

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The Examiner welcomes your comments and suggestions concerning the publication. Deadline for submission of articles is the 15th of each month for the following month's edition. Any format is welcome, however, the preferred method of submission is by e-mail or by computer disk.

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Kick the habit and learn to become tobacco free!

The Naval Hospital Health Promotions Program offers tobacco cessation classes. Classes are offered at two convenient times of noon and 5:30 p.m.

To sign up, call Health Promotions at 830-2814. The next set of tobacco cessation classes will start Jan. 6. Call now before it all goes up in smoke!

Depression and Pregnancy Workshop

Every Thursday in the Mental Health Clinic
Conference Room of the Robert E. Bush Naval
Hospital from 12:30 to 2 p.m.

For more information call 830-2584 or 830-2935

New TRICARE Rule Should Be Thought Through Before Using

By Dan Barber, Public Affairs Officer
Robert E. Bush Naval Hospital

As of December 28, patients of the Robert E. Bush Naval Hospital, as well as any military health care beneficiary, whose first prenatal visit occurs on this date or after, have more choices for their prenatal care, labor and delivery, and post-natal care under new TRICARE rules.

In 2001, Congress passed a law, which allows military family members and retirees with TRICARE Standard health care coverage to choose a civilian provider for maternity care, even if they live close to a military hospital. Members using the TRICARE Standard benefit no longer require permission (a non-availability statement) from a local military hospital to choose a civilian OB/GYN physician or Mid Wife. TRICARE Prime members will still require a referral from the hospital here to be seen by a civilian OB/GYN. These referrals are issued to TRICARE Prime enrollees only if the scope of care is beyond what can be provided at this facility. For these referrals there will be no out of pocket expenses for the patient.

This hospital is dedicated to providing excellent, family-centered and safe maternity care. Just recently the Naval Hospital opened its doors on the new "Desert Beginnings" birthing unit which features state-of-the-art equipment in a patient pleasing family friendly atmosphere.

Beneficiaries do have the option of choosing a civilian provider as their Primary Care Manager who will provide routine, outpatient care. However, in this area of the desert it may require a drive of 50 miles or more to make a visit to a doctor. There is only one OB/GYN located locally, all the rest practice in the Palm Springs area.

If a patient chooses to dis-enroll from TRICARE Prime and opts to receive their OB care with a civilian doctor or midwife for prenatal care and has the baby in a civilian hospital, then TRICARE pays for most of the care minus the co-payment. It is important to remem-

ber, there is a co-payment for maternity care with TRICARE Standard. The amount is based on the length of hospital stay and the status of the sponsor. In a Military Treatment Facility, all outpatient care and pharmaceuticals are free.

Those TRICARE Prime patients currently receiving care at the Robert E. Bush Naval Hospital who are considering dis-enrolling from TRICARE Prime see a civilian OB provider, under their TRICARE Standard benefit, should carefully consider their options.

To receive civilian maternity care, patients have two options: use the TRICARE Prime Point-of-Service option, or dis-enroll from TRICARE Prime and convert to TRICARE Standard. While civilian maternity care may seem attractive, there are disadvantages to pursuing these options.

...Prime patients currently receiving care at the Robert E. Bush Naval Hospital who are considering dis-enrolling from TRICARE Prime see a civilian OB provider, under their TRICARE Standard benefit, should carefully consider their options...

If a patient opts for the TRICARE Standard option, they will incur significant charges. The TRICARE Prime Point-of-Service option allows TRICARE Prime enrollees to receive non-emergency, TRICARE-covered services from any TRICARE-authorized provider without a referral from their primary care

manager or authorization from a health care finder. Using the TRICARE Prime Point-of-Service option is more costly to the enrollee, and Point-of-Service charges are not subject to the catastrophic cap, which means the patient or sponsor could pay more than \$1,000 or \$3,000 out of pocket in a year. However, with the Point-of-Service option, patients remain enrolled in Prime.

If a patient switches to TRICARE Standard, they will not be able to re-enroll in TRICARE Prime for a period of one year unless their sponsor is E-4 or below. During this time, if a patient needs medical attention other than maternity care, they will be subject to out-of-pocket expenses, such as deductibles and co-payments. For example, if a pregnant woman covered by TRICARE Standard is in a motor vehicle accident, these charges will apply. In addition, if an infant over three days of age sustains an injury or illness, these charges apply.

Before deciding your health care options, check with the Health Benefits Advisor at the Robert E. Bush Naval Hospital for detailed information and the best options to suit your needs. The TRICARE Service Center is located in the outpatient clinic area of the hospital. They can be reached by calling 1-800-242-6788.

African-American Heritage Committee Upcoming Events

January

Jan 13 -- Dr. Martin Luther King Commemorative Service 11a.m.-noon at the Protestant Chapel

Jan 24 -- 70's Dance 8 p.m. to midnight at the SNCO Club
(Tickets on Sale \$5.00 per person or \$8.00 at the door)

February

Feb 3 -- Black History Month Celebration: Honoring Montford Point Marines 11 a.m. to noon at the Protestant Chapel

Feb 7 -- Heritage Festival at the Community Center 2 to 5 p.m.
(Sat) Donations for adults, children free

Historic Documentary Film Festival

from 6 to 8:30 p.m. at the Community Center:

Feb 5: The Untold West, the Black West
Tuskegee Airmen

Feb 12: Buffalo Soldier
The Negro Baseball League

Feb 19: Africans in America (1450-1750)
Civil Rights Movement (1957-1962)

Feb 28: Shades of Color 5:30 to 9 p.m. at the Officers Club: (Tickets on Sale, \$20.00 per person) Includes: Dinner and Entertainment

All events are free (except for "70's Dance" and "Shades of Color") and open to all personnel aboard the Combat Center. Donations are accepted. Tickets will be on sale at all events starting Jan 13

70's Dance:

Heritage Festival:

Shades of Color:

Film Festival:

LCpl Tabor (3700) and DT2 Kingsberry (7054)

LCpl Jordon (6906) and Lt. Cmdr Alexander (6313)

Marsella Cooper (7416) Melvin Pickens (2771)

GySgt Bellamy(6376) and Tina Brown (7622)



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Introducing Dr. Mark R. Danforth

By Dan Barber, Public Affairs Officer
Robert E. Bush Naval Hospital

Lt. Mark R. Danforth, DO, MC, USNR has only been assigned to the Robert E. Bush Naval Hospital since last July, however he has been here in Twentynine Palms since July 2001 on the "green side, with the Marines."

"I really enjoy being here at the hospital where I can practice medicine. When you are off with the Marines, there is a lot of operational military training. I really enjoyed my tour with the Marines, I learned a lot and had some great adventures, however, it has been really nice being able to see patients during the day, getting more medical education and being able to associate with doctors again," said Danforth.

Prior to his assignment to the hospital, Danforth was with 3/11 here at the Combat Center. He was with the Marines when they made their drive into Iraq during the recent Operation Iraqi Freedom and saw a lot of action.

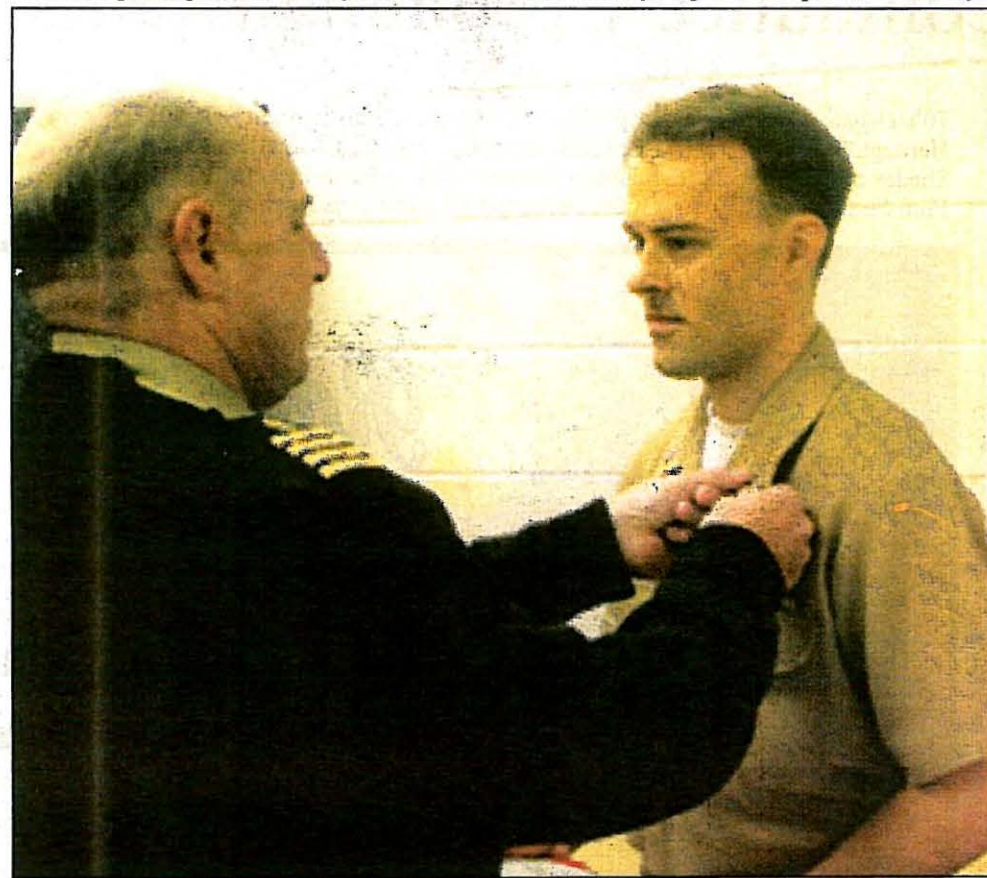
Danforth just received a Navy Commendation Medal for providing life saving measures to military personnel during combat. The unit Danforth served with in Iraq has also been nominated for the Humanitarian Award for working with local Iraqi physicians to ensure a smooth transition of medical care in post-war Iraq.

"While serving in Iraq, I didn't experience any negativity from the people we encountered as we were driving up from the South. When we got closer to the Sunni Triangle they got a little more reserved and a little more cautious. However, when combat operations were declared over, then people there were treating us like movie stars...coming up patting us on the back. I met a lot of really great Iraqi doctors; they were highly educated and very capable.

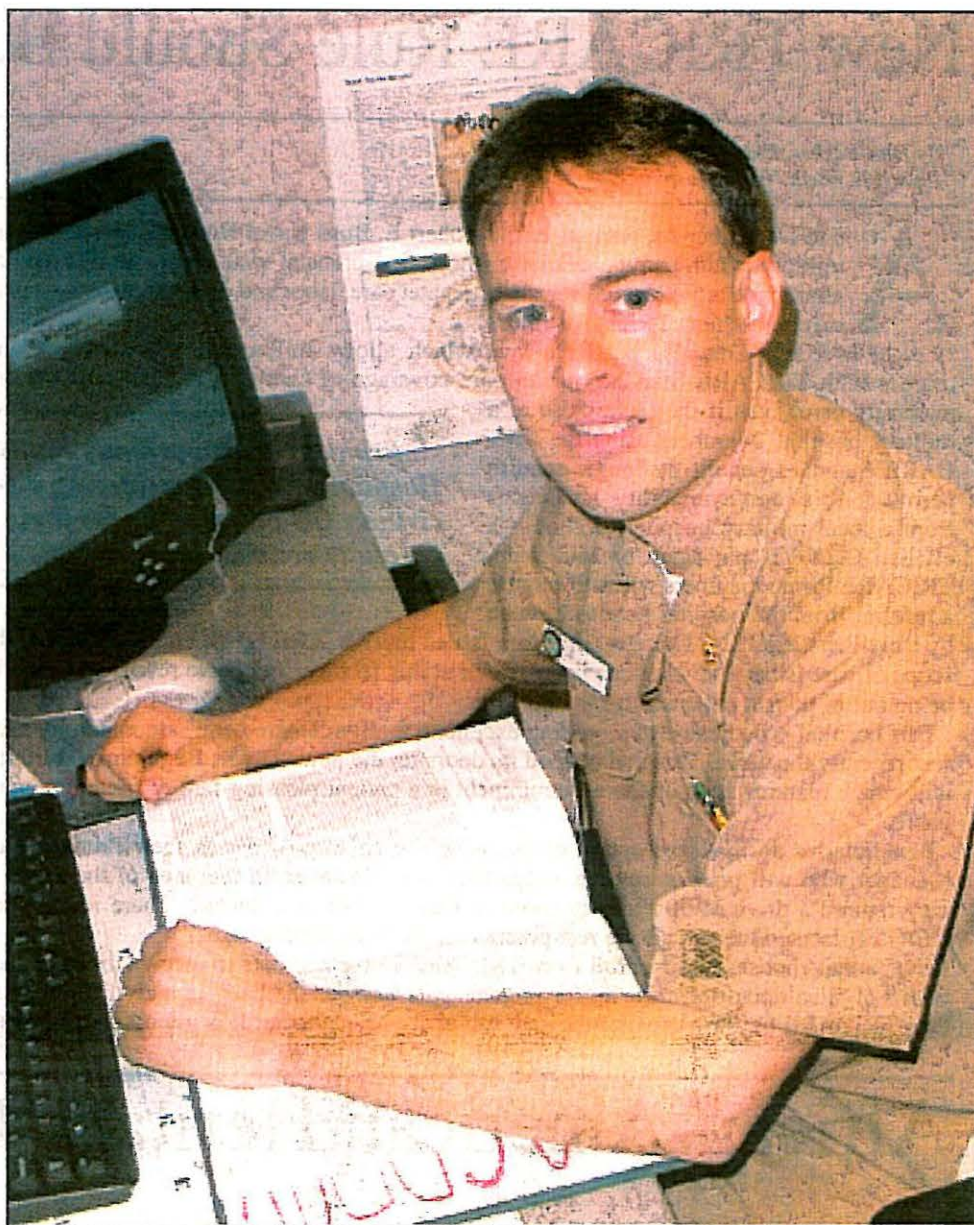
Danforth grew up in New Haven, Connecticut where he attended Choate Rosemary Hall Preparatory School, graduating in 1986. While there, he was in Tennis the captain of the team. He also played hockey and soccer.

Following graduation from high school, Danforth entered Lehigh University in Bethlehem, Pa., where he earned his Bachelor of Arts in 1991. His major was Economics/Finance with a minor in History. While at Lehigh, his honors were Highest German Achievement from the German Konsul in N.Y.; Dean's List 1990-1991; Phi Alpha Theta - Honor Society, History; Clifford B. Key Memorial Award - Highest Fraternity GPA for 1990-1991.

He also participated in Varsity Tennis, Economics Society, Sigma Phi Epsilon Fraternity,



Captain Robert J. Engelhart, Commanding Officer, Robert E. Bush Naval Hospital pins the Navy and Marine Corps Commendation Medal on of Lt. Mark R. Danforth. Danforth earned the medal for service rendered while serving in Operation Iraqi Freedom.



and the Hockey Club.

In the summer following graduation from college, Danforth studied at the Goethe Institut in Berlin, Germany.

Eventually Danforth entered the University of Health Sciences College of Osteopathic Medicine at Kansas City, Mo., where he earned a Doctor of Osteopathic Medicine in May 2000. His honors there included: Graduated Summa Cum laude; Member of Psi Sigma Alpha (Osteopathic Equivalent of Allopathic AOA Scholastic Honor Society); Certificate of Superior Performance in Gross Anatomy, Histology and Neuroanatomy.

Activities in medical school included, SOMA, Internal Medicine Club, Sports Medicine Club, Medical Military Corps, ACOFP, and AMA.

Danforth served his Internship in Internal Medicine at the Naval Medical Center, San Diego from June 2000 to June 2001.

While in medical school he met his wife, Pallavi, who is currently a resident at Loma Linda University Medical Center. They have one son, Jack, age 22 months.

When not busy at work, Danforth enjoys athletics, reading and traveling abroad. He has been able to visit Hawaii, South America, the Caribbean and Europe.

As advice to the Corpsmen here at the hospital, Danforth said, "If you want to go into medicine, think long and hard about it... it is a great career, it offers great security, it offers great benefits for yourself as well as others. Make sure that you are dedicated and if you are married and or have a family, make sure that they are ready to take on the journey with you, because it takes a lot of effort and a lot of time... it is a never ending educational process, but well worth it in the end, because it provides a great service to the community. It is a great opportunity and a great career, but it takes a lot of dedication and motivation to do it."

This summer Danforth will be leaving active duty to return to civilian life to a residency program either at UC Irvine or in the Riverside area. "I still haven't decided whether to stay in the reserves or not," he said. "I've had a lot of fun. The Navy has been a very interesting experience," he added.

Hard Chargers...



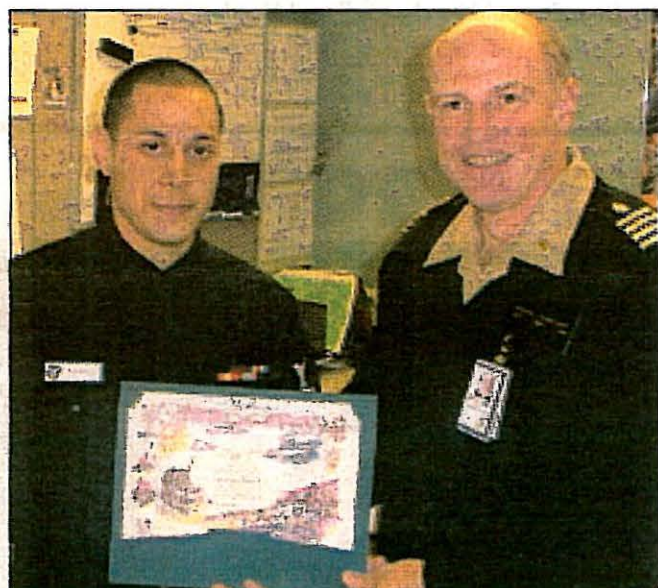
HM3 Gabriela Aleman receives her first Good Conduct Medal from Capt. Robert J. Engelhart, Commanding Officer, Robert E. Bush Naval Hospital.



HM3 Linsey Elliott of the Emergency Medicine Department receives a Commanding General's Letter of Appreciation from Capt. Engelhart.



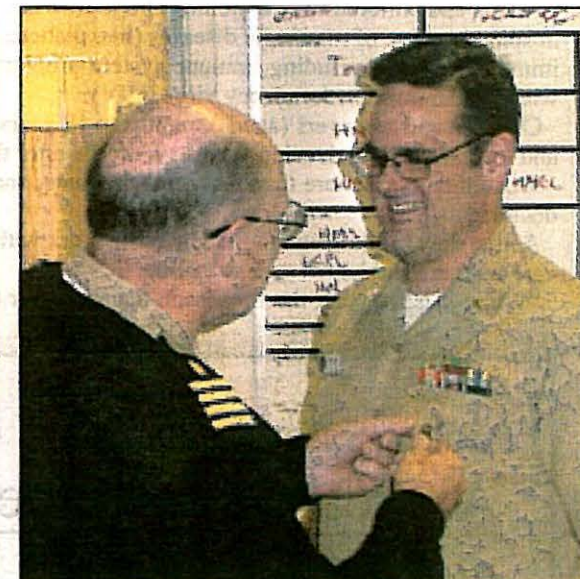
Lt. Tanya Lewis receives a Navy and Marine Corps Achievement Medal from Capt. Engelhart.



HM3 Sam Ramirez, of the Physical Therapy Department receives an Honorary Desert Rat Certificate from Capt. Engelhart.



HM3 Ericka Reyes receives her first Good Conduct Medal from Capt. Engelhart.



Lt. Jonathan Edwards receives a Navy and Marine Corps Commendation Medal from Capt. Engelhart.



Hospitalman Timothy Ohira of the Desert Beginnings birthing unit, receives a Navy and Marine Corps Achievement Medal from Capt. Engelhart.



In a double reenlistment ceremony, HM3 Sam Ramirez and HM3 Jasmin-Ramirez take the oath of enlistment for a few more years. Sam works in the hospital's Physical Therapy Department and Jasmin works at Military Sick Call.

Naval Hospital Still Giving Flu Shots to High Risk Patients

Robert E. Bush Naval Hospital has provided more than 15,000 doses of the flu vaccine to its eligible beneficiaries, according to Cmdr. John Rothacker, Director of Military Medicine.

Although news reports state that there is a shortage of the flu vaccine nationwide, this hospital has enough doses on hand to fill the needs of the population it serves. Based on Center for Disease Control (CDC) guidelines, patients with risk factors, as follows, should visit the Immunization Clinic at the Naval Hospital to receive their flu shot:

...reality remains that more than 15,000 doses of flu vaccine have been provided to MCAGCC personnel...

Persons aged 50 years or older. Some people in this group may not have chronic (long-term) medical conditions, which would put them at risk for serious complications from the flu. However, about 26 percent of people aged 50-64 years have high-risk conditions and are at increased risk for flu-related complications. Since 2000, a flu shot has been recommended for all people 50-64 years old each year;

Residents of nursing homes and other long-term care facilities that house persons of any age who have long-term illnesses;

Adults and children over 6 months of age who have chronic heart or lung conditions, including asthma;

Adults and children over 6 months of age who need regular medical care or had to be in a hospital because of metabolic diseases (like diabetes), chronic kidney disease, or weakened immune system (including immune system problems caused by medicine or by infection with human immunodeficiency virus (HIV);

Children and teenagers (aged 6 months to 18 years) who are on long-term aspirin therapy and therefore could develop Reyes syndrome after the flu;

Women who are more than 3 months pregnant, and cleared to receive the vaccine by their doctors;

Active duty military and individuals who work with people who may be high risk (i.e. day-care workers and health care workers).

"While it is true that the flu season began earlier this year than normal, it is too soon to

determine if this will result in a more serious flu season," said Rothacker.

While there remains enough vaccine in the hospital's stock for individuals in any of the risk categories above, routine family vaccinations have been halted to ensure sufficient vaccine is available for those patients at increased risks for complications.

According to Rothacker, "This should not provide undue alarm. (because) The reality remains that more than 15,000 doses of flu vaccine have been provided to MCAGCC personnel and the fact that many of your neighbors received the vaccine provides a measure of protection for you and the local community. Our rural location, coupled with very high immunization rates, makes this one of the safest places in the country for individuals who were unable to get the vaccine."

According to Lt. Troy Henderson, of the hospital's Preventative Services Department, the World Health Organization (WHO) maintains a global surveillance system for influenza activity and in conjunction with the CDC labs, they determine which strains of influenza pose the biggest risk to our population for a given year, with final approval of the vaccine mixture being granted by the Food and Drug Administration.

Some news reports the formula selected for this year's flu season, probably wasn't the right one.

Research is underway to improve the annual formula selected. "New procedures are being developed in the manufacturing process of influenza vaccines. "If the manufacturing process were sped up, a better formula could be chosen," said Henderson.

Patient Safety...

A Great Year Comes to an End

By Lt. Daniel Anthony
Risk Management Advisory Committee
Robert E. Bush Naval Hospital

Looking back over the last twelve months here at Naval Hospital Twentynine Palms, the hard work and efforts of the staff are evident in many regards. Our patient safety initiatives range from improving patient identification procedures to tackling the challenges associated with appropriate follow-through on laboratory tests ordered by the providers—our latest tasking.

As always, we have encouraged our beneficiaries through programs such as Project *Speak Up*, and our satisfaction surveys placed throughout the facility, to join us in our endeavor to provide the highest quality care in the safest manner possible. To that end, this month we are reminding our military family members about some basic steps to remember when thinking about their healthcare.

First, we stress that each patient *stay informed*. Ask questions of your healthcare provider about all aspects of your care, including those considerations after a procedure is completed (follow-up appointments, activity tolerance, etc.).

Next, we emphasize the need to understand why you are taking the medications prescribed to you. Medication errors are not problems that occur only within a hospital. Medication errors can be just as serious at home when two or more drugs are being taken together. Although the pharmacy here at NHTP is a busy place, the staff is always willing to take the time to educate patients on safe medication usage.

Finally, we urge patients to inquire about their test results. When laboratory work is performed, results are normally available with a day or two. Follow up on your lab work. Call the clinic if you do not hear back within a reasonable amount of time.

These are simple guidelines to follow, but all-too-often the mistakes we make can be traced to forgetting about the basics of good healthcare. 2003 was a great year for us here at NHTP, and with everyone working together, 2004 can be even better.

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BARRACKS...

Continued from page 1



Robert E. Bush, Medal of Honor recipient, and name sake of the Robert E. Bush Naval Hospital, speaks at the Carson Hall dedication ceremony.

"It wasn't for Master Chief Carson, I may not have gotten the job done."

Carson served as the Command Master Chief of the Robert E. Bush Naval Hospital from Aug. 23, 1999 to Aug. 23, 2002.

According to his biography, Carson served his first official tour of duty at the Naval Medical Center, Pensacola, Fla., from 1976-1981; he accepted orders to the USS Coronado (AGF-11), forward deployed in Manama, Bahrain. In October of 1982 he received orders

well deserved. He is missed so much by all who came in contact with this exceptional human being."

Robert Bush also spoke about his memories of Carson. "He was a real leader. When the hospital was going to be named for me, the Commanding Officer at the time wanted the Chief of Naval Operations, Admiral Jay Johnson, to be the guest speaker. Craig asked me to get him to come, and then he must have called me 30 times to make sure that the CNO was going to be here." He added, "If it

back to Naval Medical Center, Pensacola.

In 1985, Carson applied for and was accepted to the Naval Undersea Medical Institute, Groton, Conn. for Submarine Independent Duty Corpsman School.

Upon graduation, Carson accepted orders to the USS New York City (SSN-696). His tour was successful, earning his Enlisted Submarine Service Warfare device and being selected to Chief Petty Officer.

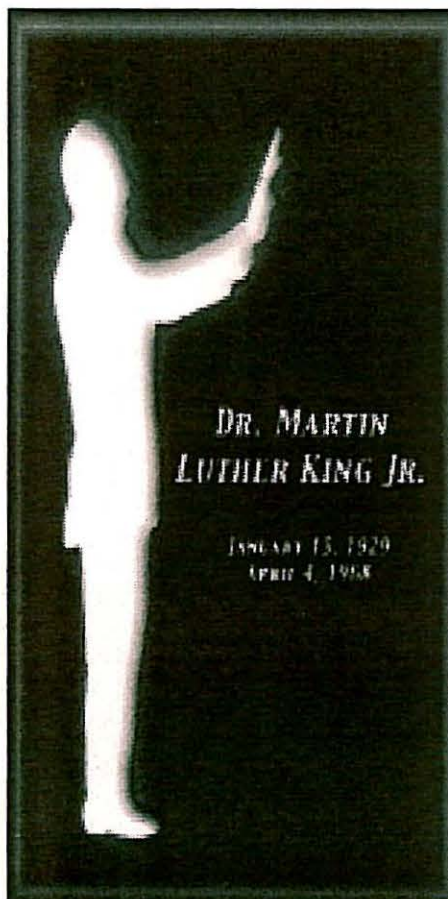
In 1989, Carson was transferred to the Office of the Commander in Chief, Pacific Fleet, in Pearl Harbor where he worked as the Administrative Assistant to the CINCPACFLT Surgeon. During this tour of duty, Carson earned his Bachelor of Science degree and was selected to Senior Chief.

In August 1992, he was transferred to the Commander, Submarine Group Seven in Yokosuka, Japan where he was responsible for the medical support of all western deployed submarines in the 7th Fleet. Upon completion of this demanding assignment, Carson returned to sea as the IDC aboard the USS Montpelier (SSN-765) in Norfolk, Va. In 1997, Carson transferred to shore duty at the Branch Medical Clinic, Naval Amphibious Base, Little Creek, Va. as the Leading Senior Chief. During this assignment, the USS Hampton (SSN-767) experienced an unplanned loss of their IDC. Carson volunteered to fill the billet and headed out to sea almost immediately. As a result, the submarine was able to continue her mission and Carson received high accolades from the Commanding Officer, USS Hampton, who stated, "Master Chief Carson was the finest IDC he had ever served with". During this assignment, he was selected to Master Chief.

In 1999, Master Chief Carson transferred to the Naval Hospital, Twentynine Palms, Calif., as the Command Master Chief. At this point in his career, his reputation as a leader had preceded him and the command flourished.

It was during this tour that he coordinated the planning and construction of the barracks. Master Chief Carson was the driving force behind the numerous Quality of Life initiatives for the barracks. Construction was completed during his assignment and resulted in the barracks being awarded the "Zumwalt 5 Star Accreditation for excellence in Bachelor Enlisted Housing"; the first west coast barracks under the Bureau of Medicine and Surgery to achieve this award.

In October 2002, Master Chief Carson accepted twilight tour orders as the Hospital Corpsman Rating Advancement Exam and Non-Resident Training Course writer at the Navy Advancement Center, Naval Education and Training Professional Development and Technology Center, Saufley Field, Pensacola, Fla. It was during this assignment, that Master Chief Carson met his tragic death as a result of a motor vehicle accident in February of 2003.



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Naval Hospital Twentynine Palms
Classroom 3 (behind Family Practice Clinic)
Every Monday 10 a.m. -noon
Breast Education Center 830-2501

Preparing for a New Baby



Robert E. Bush Naval Hospital will be offering a Sibling Preparation Class on Saturday, Jan. 10, from 10 a.m. to noon. This class is designed to help children of expectant families prepare for the role of big brother or big sister. Pre-registration is requested and can be done by calling Outpatient Services at 830-2752. The class is located in classrooms 1&2 in the Naval Hospital.

The class is geared toward children ages 3 years and up whose mothers will be delivering soon. Normal newborn appearances and ways to help mom and dad at home will be discussed, and the new siblings will learn how to diaper and bundle their new babies in blankets. Each child is asked to bring a doll/stuffed animal to help with these skills.

A short film, activities, coloring, and talk time are included in the class. In addition, the children are also asked to bring a small gift to wrap for their new baby, and they will get the chance to dress-up in operating room attire.

A tour of Desert Beginnings Birthing Unit is also included. Monthly classes will be offered. For more information, please call Lt. Cmdr. Nicole Polinsky at 830-2258 or Lt. Cmdr. Marjorie Alexander at 830-2771.



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